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COVER LETTER

TO:	Registration Section Division of Corporati	ons		
SUBJI	ССТ:	Trad	lewinds E & C, LLC	
		N	ame of Limited Liability Company	
				Transact Business in Florida," Certificate of lity company to transact business in Florida
Please	return all corresponden	ce concerning this n	natter to the following:	
			Adam Aldous	
			Name of Person	
	 		Tradewinds E & C, LLC	·
			Firm/Company	
			Address	
	····			
			City/State and Zip Code	
	e Tita .		Idous@nightflightconcepts.c (to be used for future annual report no	
For fur	ther information concer		•	ouncations
	Ad	am Aldous	at (561)	339-0803
	Nan	ne of Person	Area Code & Daytime Telepho	one Number
	MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ons	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclo	sed is a check for th	_	unt: ng Fee & \$155.00 Filing Fee &	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Name of Foreign Lim	Tradew	rinds E	& C, LLC "Limited Liability Company," "L.L.C.," o	r "LLC")	
(Nume of Foleigh Em			FC, LLC	. 220.)	
	ternate name adopted for the anaging members adopting t	purpose o	of transacting business in Florida and attacte name. The alternate name must include		
2. De	laware	3.	27-2967325 (FEI number, if applicable)		
(Jurisdiction under the law company is organized)	of which foreign limited liab	oility	(FEI number, if applicable)		
4. July 1	, 2010	5.	Perpetual (Duration: Year limited liability company		
(Date of Or	ganization)		(Duration: Year limited liability company exist or "perpetual")	will cease to	<u>.s.</u>
6. September 22, 201					ECR
(S	Date first transacted businesses sections 608.501 & 608.56	s in Florid 02 F.S. to	a, if prior to registration.) determine penalty liability)	EP 2	E TE
 6968 Heritage Dr, F 	Port St Lucie, FI 34952	2			3 ≺ [
					ST.S. J
	(Street Ac	ddress of l	Principal Office)	2	計
8. If limited liability cor	npany is a manager-mar	naged co	mpany, check here	7	Z
9. The name and usual b	usiness addresses of the	managi	ng members or managers are as fol	lows:	
******	Adam	ALdo	u S		
	6968 H	erita	ge DY		
***	Port St.	Luc	ie. FL 03952		
_	f which it is organized. (A pho	otocopy is	s old, duly authenticated by the official havin not acceptable. If the certificate is in a foreig ed.)		rds in
11. Nature of business of	r purposes to be conduc	ted or pr	omoted in Florida:		
	Consulting	g, Expo	rt Licensing	,	
× —	All bluss				
(In	accordance with section 608.40	8(3), F.S.,	rized representative of a member. the execution of this document constitutes that the facts stated herein are true.)		
_		Adam A			
	Typed or pr	rinted na	me of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Tradewinds E & C, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
Tradewinds/NFC, LLC	
2. The name and the Florida street address of the registered agent and office are:	밀
Adam Aldous (Name)	10 SEP 27
6968 Heritage Dr,	27 P
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Port St Lucie FEI 34952	5
City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

+ Uff Uh (Signature)

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of Delaware Secretary of State Division of Corporations Delivered 01:45 PM 06/25/2010 FILED 01:37 PM 06/25/2010 SRV 100691641 - 4841113 FILE

Certificate of Formation

of

Tradewinds E & C LLC

This Certificate of Formation for Tradewinds E & C LLC LLC dated June 25, 2010, is being duly executed and filed by Jane S. Goldberg, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. '18-101, et seq.).

FIRST: The name of the Limited Liability Company formed hereby is Tradewinds E & C LLC.

SECOND: The address of the registered office of the LLC in the State of Delaware is c/o 4406 Tennyson Road, Wilmington, New Castle County, Delaware, 19802.

THIRD: The name and address of the registered agent for service of process on the LLC in the State of Delaware is Delaware Corporate Agents, Inc., 4406
Tenzyson Road, Wilmington, New Castle County, Delaware, 19802.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the date first above written.

/s/ Jane S. Goldberg Jane S. Goldberg, Authorized Person

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TRADEWINDS E & C LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIRST DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRADEWINDS E & C LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2010.

4841113 8300

100709178

DATE: 07-01-10

AUTHENTICATION: 8090936

You may varify this certificate online at corp.delaware.gov/authver.shtml